U.S. District Court for the Northern District Of Illinois Attorney Appearance Form

Case Title: Moore v. AJT Diabetic	Case Number: 1:19-CV-07707
An appearance is hereby filed by the undersigned as attorney for:	
Defendant AJT Diabetic	
Attorney name (type or print): Christopher W	/ager
Firm: Mac Murray & Shuster LLP	
Street address: 6525 West Campus Oval, Suite 210	
City/State/Zip: New Albany, Ohio 43054	
Bar ID Number: 0084324, Ohio (See item 3 in instructions)	Telephone Number: 614-939-9955
Email Address: cwager@mslawgroup.com	
Are you acting as lead counsel in this case?	Yes No
Are you acting as local counsel in this case?	Yes No
Are you a member of the court's trial bar?	Yes No
If this case reaches trial, will you act as the t	rial attorney? Yes No
If this is a criminal case, check your status.	Retained Counsel Appointed Counsel If appointed counsel, are you Federal Defender CJA Panel Attorney
In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear <i>pro hac vice</i> as provided for by local rules 83.12 through 83.14. I declare under penalty of perjury that the foregoing is true and correct. Under 28 U.S.C.§1746, this statement under perjury has the same force and effect as a sworn statement made under oath.	
Executed on July 1, 2020	
Attorney signature: S/ Christopher Wage	er

(Use electronic signature if the appearance form is filed electronically.)